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Improving Staff Knowledge on Hourly Rounding Using the 4Ps to Reduce the Fall Rate

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This is to certify that the doctoral study by

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has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

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Walden University
2025

Executive Summary: Staff Education Project

Improving Staff Knowledge on Hourly Rounding Using the 4Ps to Reduce the Fall Rate

by

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Executive Summary Submitted in Partial Fulfillment

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Summary

I designed this Doctor of Nursing Practice (DNP) project to develop an educational program that increases staff knowledge of hourly rounding using an evidence-based approach, specifically pain, position, potty, and possession (the 4Ps), to prevent falls among residents in a long-term care facility. According to facility leadership, the observed gap in practice was the nursing staff members' lack of knowledge in performing hourly rounding. The facility's fall records for the lockdown units indicated a surge in fall rate, with 32 falls among 62 residents per month, reflecting a need for action. The practice-focused question guiding the project was: For staff in a long-term care facility, will education on hourly rounding using the 4Ps increase knowledge toward the ultimate goal of reducing the fall rate? The purpose of the project was to enhance the nursing staff's knowledge of utilizing the 4Ps in reducing their fall rates and ensuring the safety of residents. I conducted a comprehensive literature review, finding substantial evidence using the hierarchy levels of research evidence from Levels 1 to 3, all of which demonstrated that educational programs increase staff's knowledge of hourly rounding using the 4Ps and that effective rounding could reduce the fall rate. In this educational intervention, I employed a 10-item multiple-choice pre- and post-test to evaluate participants' knowledge gain, which was analyzed using simple descriptive statistics. The pre-test average was 55%, and the post-test average was 98%, indicating a 43% increase. The results indicated, therefore, that the educational program improved participant knowledge. Collaborating with the facility's staff development nurse, I recommend including this educational program in their new hire orientation package, which would promote positive social change by strengthening competencies and promoting diversity and equity within their facility and organization.

Background

The 4Ps approach to hourly rounding is a systematic method that focuses on four key areas: pain, position, potty, and possession (Shaw et al., 2020). This approach ensures that residents' needs are regularly assessed and addressed, thereby reducing the risk of falls. By definition, 'pain' refers to the assessment and management of any discomfort or pain the resident may be experiencing. 'position' involves ensuring the resident is in a comfortable and safe position, 'potty' involves assisting the resident with toileting needs, and 'possession' involves ensuring the resident has their personal possessions within reach. Falls, a pressing issue in long-term care facilities, are defined as patients' unprepared descent to the floor or other lower surface with or without injury or even death (witnessed or unwitnessed) (O'Malley et al., 2022). The urgency of this issue cannot be overstated, as it has a profound impact on resident care. Falls are detrimental to the older population in the community, as well as in long-term care facilities, assisted living facilities, and acute care settings. The injuries sustained from falls can be physical, like fractures, mainly of the hips, skin tears, and lacerations, or psychological, like anxiety, depression, and fear of falling. All these effects might result in immobility and or death. However, multiple studies have demonstrated that evidence-based fall prevention educational programs incorporating hourly rounding with the 4Ps approach increase knowledge, leading to a reduction in fall rates and improved resident safety (Gliner et al., 2022).

The project site nursing staff's lack of knowledge in performing hourly rounds was evident after a mini project with the preceptor. Most staff members were unfamiliar with hourly rounding, and those with some understanding of the intervention struggled to perform correctly. The director of nursing services (DNS) complained that, due to staff members lacking the knowledge to perform hourly rounding correctly, there has been an increase in falls in the units. She continued that there has been a surge of new

staff members, who are in their first job and have no knowledge or understanding of the hourly round. After the creation of the two lockdown units, the nursing department failed to adequately educate the staff members of those units on how to perform hourly rounding. At the end of the discussion with the DNS, we determined that an educational program for the nursing staff was crucial to increase their knowledge on how to perform meaningful hourly rounding accurately.

The primary purpose of this project was to educate and evaluate the impact of an educational program on increasing knowledge among nursing home staff members to use hourly rounding with the 4Ps in reducing the fall rate in their facility. The practice-focused question for the project was: Will an education program on purposeful hourly rounding using the 4Ps increase staff knowledge in a long-term care facility, with the ultimate goal of decreasing the fall rate?

In collaboration with facility leadership, I designed this educational fall prevention program plan for nursing staff members and the staff development manager to include in their nursing staff orientation package, aligning with the project's practice-focused question. I also used the practice-focused question as a guide to search for previous literature that addressed the gap in practice.

The primary aim of this project was to create an educational fall prevention program that would increase the nursing staff's knowledge in performing hourly rounding. The inclusion of the program in the new nursing hire package would guide new staff in increasing their knowledge of hourly rounding before they start engaging with residents, and it would also serve as a competency for new hires. The most important aspect of this program is its potential for long-term sustainability and the positive impact it could have on the facility and its residents. This instills a sense of hope and optimism in the long-term care facilities about the future of fall prevention.

The 4Ps are evidence-based outcome measures using hourly rounding (Brosinski & Riddell, 2020). During the hourly rounding, nurses will use the 4Ps to address the comfort of their residents by assessing the resident's pain, reassessing it after medication administration, and evaluating its effectiveness. They will also evaluate the potty by asking residents if they need to use the bathroom. They

will assess positioning by asking the residents if they are comfortable in bed or repositioning an immobile resident in the bed or wheelchair. Nursing staff will ensure that residents' possessions are within easy reach, their surroundings are clutter-free, and their call button is readily accessible. Having the resident's call button within easy reach promotes a sense of security and safety. This approach emphasizes the vital role of nursing staff in ensuring resident comfort and safety.

Current literature suggests that an evidence-based fall prevention program effectively reduces falls and related injuries in the residents of long-term care facilities (Gliner et al., 2022). Hourly rounding is an essential part of nursing and patient care that addresses patients' needs, such as pain, potty (i.e. toileting), positioning, and possessions, hence the name 4Ps. Gliner et al. (2022) reported that nurse hourly rounding reduces patients' use of call lights, improves patient satisfaction, and decreases falls in various healthcare settings. Additionally, Al-Anati et al. (2024) described intentional rounding as a structured approach in which patients are checked at specific times to assess, anticipate, and meet their functional needs. The authors outlined six steps in intentional rounding: introduction, setting expectations, assessing patients' needs, using the 4Ps, delivering patient care, and documenting the care provided. Purposeful and meaningful rounding using the 4Ps provides a resident-centered care approach, thereby improving residents' satisfaction and decreasing the risk of adverse events. Integrating teamwork training, staff-led system design, and customized intentional rounding effectively reduced patient falls (Di Massimo et al., 2024).

I selected 15 studies for review for the educational program. Seven were Level 1, six Level 2, and two Level 3. Twelve of the selected articles were of high quality, while three were of low quality. Based on my review of articles, there was strong, compelling evidence that all the articles consistently and convincingly demonstrate outcomes, indicating that education programs on fall prevention improve nursing staff knowledge, resulting in a reduction of fall rates, and enhance effective communication.

Prior to attending the education program, staff members completed a pre-test questionnaire to assess their knowledge of hourly rounding using the 4Ps. This helped to identify areas for improvement and tailor the educational program to their needs. According to Carter et al. (2020), staff education on fall prevention strategies will enhance the care environment for residents in the facility by increasing observation and responding to resident needs more effectively. The post-test questionnaire was used to assess the impact of the educational program and provide feedback on its effectiveness.

Staff Education Project Development

I implemented this project after obtaining approval from my DNP committee members and completing the ethics pledge. The goal of this project was to increase the knowledge of nursing staff members about purposeful hourly rounding using the 4Ps. The procedures for creating this educational fall prevention project involved developing a PowerPoint presentation (see Appendix B) to educate the 20 leadership-selected participants working different shifts. It took about 1 hour and 30 minutes to present the training to the participants. I answered their questions extensively and demonstrated how effective communication and collaboration would make hourly rounding easier.

Using the evidence from the literature search and subsequent program, I created a 10-question pre- and post-education questionnaire (see Appendix A) to evaluate participants' understanding of hourly rounding and the impact of the educational program presentation on them. The participants completed the pre-test questionnaire prior to their training, which evaluated their knowledge of hourly rounding. Then, after the presentation, they completed a post-test to evaluate the impact of the presentation on their understanding of how to perform hourly rounding.

The DNS provided me with the completed participants' pre- and post-test questionnaires for analysis. The participants were instructed not to use their names; instead, I assigned them an alphabetized code, which remained the same for both the pre- and posttests. All participants completed the test questionnaire (N = 20), resulting in a 100% completion rate.

I used simple descriptive statistics and percentages to assess knowledge gain among the participants. I analyzed the data collected from the questionnaires to determine if there was an increase in staff knowledge from the educational program, indicating the effectiveness of the intervention. The results were as expected, showing an increase in the nursing staff's knowledge of using the 4Ps during hourly rounding.

Results

The participants' mean scores on the pre- and post-questionnaires indicated a difference in percentages, representing an improvement in knowledge after the education program and the implementation of the educational fall prevention project. The mean average scores for the pre-test were 55%, and the mean post-test score was 98%, representing a 43% difference. The participants' post-test questionnaire scores revealed a high percentage difference from the pre-test results. This result indicated a positive relationship between the nursing staff's educational program on fall prevention and increased knowledge of hourly rounding.

The project could impact the project site facility and organization in various ways, such as being named the best long-term care facility and organization with the fewest resident falls. When named the best facility for residents' falls, the organization's reimbursement from the Centers for Medicare and Medicaid Services will increase, demonstrating its commitment to maintaining a safe environment for residents. Additionally, the facility's pressure ulcer report may decrease due to the implementation of an educational program aimed at fall prevention. The costs of treatment for an injury sustained from a fall would also decrease. I foresee other long-term care facilities emulating the fall educational program from this facility. The most significant impact on the facility would be an increase in the relationship between residents and their families with the facility, as their loved ones are kept safe from fall incidents.

The project took place in a small unit with limited space in a local long-term care facility, which could have impacted the project's outcomes. The project had a positive impact on the nursing staff, enabling them to master hourly rounding using the 4Ps approach and potentially reduce falls in their unit. The project enhanced communication among nursing staff, between staff and residents, and their relationships, which are crucial during hourly rounding. Collaboration in hourly rounding is a primary interconnected strategy needed to improve residents' care and safety in the facility. The facility's decision to hire a unit monitor for the lockdown units during the project may have impacted the project's outcomes.

The importance of this project will extend beyond the long-term care facility by fostering collaboration and partnerships with other sister facilities and beyond, thereby enhancing the safety of residents within communities around the state from falls and injuries (see Jadalla et al., 2024). Some certified nurse aides (CNAs) and nurses hold multiple jobs, so the project would help transfer the experiences they have learned to a different setting. The project also supports nurses' individual growth, develops essential skills in hourly rounding, and promotes knowledge and independence. This project allows nursing staff to connect with their community, creating a sense of belonging and personal responsibility. Other healthcare facilities and providers can utilize the project results to create a safe environment for patients or residents, enhance staff knowledge, and improve organizational outcomes related to fall reduction.

Conclusion

Falls decrease the quality of life of the older population in long-term care facilities and cause physical and emotional trauma to the victims. I conducted this project to increase staff knowledge on hourly rounding with 4Ps, thereby reducing the incidence of falls among residents

in a local long-term care facility. Hourly rounding with 4Ps is an evidence-based fall prevention program that enhances staff knowledge, communication, collaboration, and resident-staff and family-facility relationships while also decreasing the incidence of injuries. My goal with this project was to demonstrate that using an evidence-based education program on multi-component fall prevention can improve the nurses' knowledge of the issue (see Dautzenberg et al., 2021). This DNP staff educational fall prevention program project demonstrated a 48% increase in staff knowledge regarding hourly rounding. With this positive effect of staff education, it is ideal to sustain the educational program in the facility for further nursing staff members.

The impact of this project will result in collaboration among all staff members to significantly reduce the number of falls and improve residents' overall safety and well-being. Other possible impacts of the project are the facility being named the best long-term care facility and organization with the fewest residents' falls, increasing communication among staff members, strengthening resident-nursing staff relationships, and increasing facility-family relationships.

I recommend that the facility incorporate this educational fall project into their new hire orientation package to ensure new hires are knowledgeable on hourly rounding. I further recommend activities in the recreational department to keep this resident population engaged and occupied. Dipietro et al. (2019) showed that engaging in light recreational activities improves the physical function and mobility of older adults, thereby reducing their risk of falls. Another recommendation is that the facility assistant director of nursing continue with monthly falls team meetings and write the number of falls per unit on their noticeboard. This project will ensure that

the educational fall prevention program becomes part of nursing staff members' standardized practice in their daily routine (see Portela Dos Santos et al., 2022).

A facility should ensure that its nursing staff members are knowledgeable about hourly rounding and the use of evidence-based fall prevention strategies. The facility can mitigate fall-related emotional withdrawal by establishing an evidence-based fall prevention education program, which can decrease the number of falls and alleviate the psychological and physical effects of falling. Evidence-based fall prevention education fosters positive social change by increasing nurses' knowledge.

Diversity needs to be considered during fall prevention programs because studies have shown that the risk of falls in this population differs by race, ethnicity, and culture. Jang et al. (2021) showed that African Americans are less likely to fall than Whites, although they are all at higher risk for falling. Equity in the fall prevention program would ensure that underserved communities, such as older populations with disabilities, can access it. The program will also include those younger than 65 years old who have a medical, psychological, or physical disability that increases their fall risk, as well as those with a history of falls, cognitive disabilities, and medically disabled people.

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Appendix A

Pre-and Post-Questionnaire Test
Nursing Staff

1. What is the purpose of hourly rounding with the 4Ps?
    a. A structured, evidence-based fall prevention program that reduces falls and keeps residents safe.
    b. A fall prevention program formulated by National Healthcare Associates.
    c. A fall prevention program that ensures residents walk safely in the hallway.
    d. All of the above.
2. Does an educational program on purposeful hourly rounding increase staff knowledge for reducing falls?
    a. Yes.
    b. No.
    c. Unsure
3. What are the major or significant FACTS of the educational program on purposeful hourly rounding?
    a. Proactively addresses residents' needs. Improves staff knowledge on hourly rounding
    b. Improves staff communication, workflow, and satisfaction
    c. All of the above
4. Who is at risk of falling in a long-term Care (LTC) facility?
    a. Families
    b. Staff and vendors
    c. Residents
    d. None of the above
5. What is the whole meaning of the 4Ps used in hourly rounding?
    a. Property, Pain, Potty, and Privacy

b. Pain, Possession, Property, and Potty

c. Pain, Property, Potty, and Position

d. Possession, Privacy, Pain, and Property

6. Which resident can staff use the purposeful hourly rounding with 4Ps on?

a. All residents

b. High fall risk residents

c. Alert and confused residents

d. New residents admitted within 72 hours only.

7. What can a staff member do during the hourly rounding with 4Ps?

a. Ensure that the residents' surroundings and rooms are clutter-free

b. Ask the resident if there is anything else to do before leaving the room or the resident.

c. Explain to residents and loved ones what you are doing.

d. All of the above

8. Who can perform the hourly rounding with 4Ps?
   a. All staff, regardless of department
   b. Only the CNAs
   c. Only the Nurses
   d. Only those concerned.
9. What is the significant benefit of hourly rounding?
   a. It decreases burnout among staff members
   b. It decreases resident and family satisfaction
   c. It decreases falls in residents and ensures their safety
   d. None of the above
   e. A and B
10. Where can hourly rounding be performed within the facility?
    a. In the resident's room
    b. Hallways
    c. Anywhere there are residents
    d. In the dining room, recreational room, or at the nurse's desk or station

Answers: 1d, 2a, 3d, 4c, 5c, 6a, 7d, 8a, 9e, 10c

Appendix B.

PowerPoint Presentation

OBJECTIVES

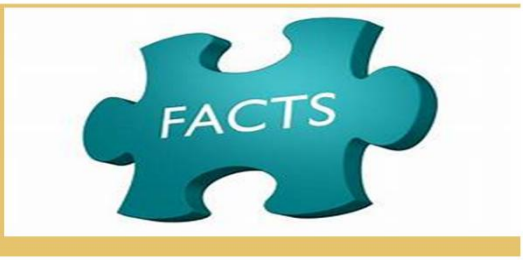
- why purposeful hourly rounding is effective and powerful
- Motivates nursing staff members to be advocates and to engage in teamwork
- Nursing staff involvement and accountability for residents' satisfaction
- Increases nursing satisfaction
- Increases nursing staff members' knowledge

Hourly Rounding for Improved Patient Care

SAMPLE FOOTER TEXT 20XX 5

FACTS

- It Proactively addresses residents needs
- Improve staff knowledge
- Improves staff workflow and satisfaction
- Improves service quality and resident-centered care
- Decreases risk for pressure ulcers, falls
- Improves safety and clinical quality
- Improves staff responsiveness



TOPIC ONE

Subtitle: Fall Definition

- Fall a sudden coming to rest in a lower level, can be either witnessed or unwitnessed
  - Affects elderly 65 years and above
- Can result in various injuries or not.
- Over 14 million falls annually
- Hospital costs are in millions of dollars
- What is the cost to residents?

Appendix B cont.

TOPIC TWO
WHO IS AT RISK

- All residents are at risk
  - Degree of risk differs
- Who assesses the degree of riskiness
  - Nurse managers or supervisors, charge nurses
  - Any person can assess any resident's risk of fall
  - WHEN
    - During admission, quarterly, and during sick
    - After actual or near fall

TOPIC THREE
What to do/rounding

- Using the 4P's
  - Pain, potty (toileting), possession, and position.
- During the rounds
  - Ask residents if they have pain or any discomfort
  - Inform the charge nurse if there is pain or discomfort (whether it is old or new)
- Ask a resident if he or she needs to use the bathroom or assess those who cannot answer for incontinence
  - It will reduce their attempt to use the bathroom independently and reduce falls
- Look around to ensure their phone, call lights, and personal items are close to them.
  - These will reduce trying to obtain the item and reduce falls

- Check resident to ensure that they are comfortable in their position
  - Reposition those in the wheelchair
  - Ensure that surroundings are cluster-free
  - Create a clean path for the wanders

Cont.

EXPLAIN GOALS OF ROUNDING

- **Regardless of mentation**

Explain the reason for the hourly rounding

- **To ensure safe**
- **Feels connection to humanity**
- **Addressing any concerns**

Appendix B cont.

Appendix B cont.

TOPIC 4

Fall Intervention

- Multiple studies have shown the benefits of hourly rounding
  - Increases teamwork in nursing
  - Reduces certain nursing behaviors
  - Nursing staff members respond well to resident's needs and wants
  - Decreases burnout
  - Decreases call light usage
  - Increase resident and their family's satisfaction

- Decreases fall to more than 50%
- Increases staff satisfaction
- Staff have more time to attend to other tasks as fewer call light is answered

CONTINUE

WHEN TO DO HOURLY ROUNDING?

- Every hour during the day, afternoon, and evening. When residents are awake
  - Don't wake any resident up during rounding
- Every two hours of sleep from 10 pm till 6 am.

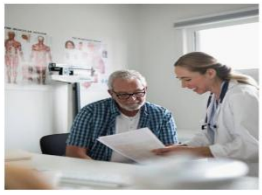
Hourly Rounding Log:

7A____	8A____	9A____	10A____
11A____	12P____	1P____	2P____
3P____	4P____	5P____	6P____
7P____	8P____	9P____	10P____
11P____	12A____	1A____	2P____
3A____	4A____	5A____	6A____

WHERE TO PERFORM OR DO HOURLY ROUNDING

- In the rooms
- Hallways
- Television room
- Common Areas
- Physical and Occupational room
- Anywhere where there is or are residents

Appendix B cont.

SUMMARY

Elderly populations are prone to falls, which sometimes result in injuries and death. Evidence-based fall prevention programs, like hourly rounding, have been shown to decrease falls and related injuries, reduce the costs of treating falls, and increase resident satisfaction. However, educating nursing staff members on improving their knowledge to perform hourly rounding is essential, as it increases communication and teamwork, decreases burnout, and significantly reduces falls and fall risks.